170991

ILLINOIS INDUSTRIAL PRETREATMENT QUESTIONNAIRE

Study Performed for Illinois Environmental Protection Agency by
GCA Corporation/Technology Division, Bedford MA 01730

Please indicate corrections to information in the space provided below:

GLEASON GEAR COMPANY*
2301 CURTISS ST 01072
DOWNERS GROVE IL 60515 234
F C FIELSTICKER PR 312/969-7040
3190 3500-3720-3451- - -

1 5

[1] Name: _____ 7-36

Street: _____ 37-61

City: _____ 62-74 Zip: _____ 75-80

[2] Contact: _____ 7-25 Tel: _____ 26-35

General Facility Description — The following information is necessary for data analysis purposes:

Nature of Business: Manufacturer of Spiral Bevel Gears 36-54

Number of Employees: 212 55-59 RJ

Standard Industrial Classification (SIC) Codes:

[3] Primary: 3566 7-10 Additional: _____ 11-14 _____ 15-18 _____ 19-22 _____ 23-26 _____ 27-30

SECTION 1

This section deals with wastewaters discharged to any municipal sewers, or to any streams, lakes, or other surface waters.

Most of the questions contained below are either explained in the question, or are self-explanatory. We have tried to design the questionnaire such that most of the responses will not require extensive file searches. Unfortunately, some of the questions will require some work; however, we only ask for this information because it is very important to Illinois' developing a realistic, workable program that is fair to all.

Please answer all questions as completely as possible. If the information is just not obtainable, then do not answer the question. If you believe you have a reasonably good answer to a question, but do not know for sure, then your best estimate will be an acceptable response.

1. If your facility is essentially "dry" and: 1) has no water or wastewater discharge to any stream, lake or other surface water, and 2) has no discharge, other than domestic wastes and storm water, to any sewer system, then please check the "yes" box below and proceed to PAGE 5 of this questionnaire. This probably means that your operation will not be covered by the pretreatment regulations. Otherwise, please check "no" and continue answering questions 2-12.

   This is a "dry" operation: Yes ☐ 31-1 No ☒ 31-2

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2. Facility Water Intake

a) Estimated Total Volume (See Volume Code Key) 3 (32)

b) Intake Sources (Check appropriate boxes)

(33) ☒ 1—Municipal or private
☐ 2—Surface Water
☐ 3—Ground Water
(36) ☐ 4—Other

3. Facility Water Use and Volume (See Volume Code Key)

(37) 3 Non-Contact Cooling Water
____ Boiler Feed Water
____ Process Wastes and Contact Cooling Water
2 Sanitary Wastes
____ Other Sources of Water Discharge
(42) ____ N/A (Intake water not discharged, i.e., evaporative losses, part of final product)

Volume Code Key (gallon/day)	
1 — 0 to 1,500	5 — 50,000 to 100,000
2 — 1,500 to 10,000	6 — 100,000 to 500,000
3 — 10,000 to 25,000	7 — 500,000 to 1,000,000
4 — 25,000 to 50,000	8 — Greater than 1,000,000

4. If waste generation changes seasonally, indicate by month (i.e., January = 01, February = 02, etc.) the peaks:

(43-44) ____ Peak 1
(45-46) ____ Peak 2
(47) X N/A Same all year

5. If discharge is to a sewer and is of a batch nature, please indicate the number of batches per day:

0 (48-49 RJ)

6. Has an NPDES permit been issued to your facility? Yes ☒ (50-1) No ☐ (50-2)

7. Chicago Metropolitan Sanitary District area industries only: please provide your federal tax number (FID): N/A (51) _____ (59)

8. Do any of your waste waters discharged to any sewers, streams, lakes, or other surface waters contain, or are they suspected of containing (i.e., if they are present in any of your raw material, or finished products) any of the following materials? If yes, indicate which ones by checking appropriate box(es).

[4] 6

7-1 ☐ Antimony
2 ☐ Arsenic
3 ☐ Asbestos
4 ☐ Beryllium
5 ☐ Cadmium

6 ☐ Chromium
7 ☐ Copper
8 ☐ Cyanide
9 ☐ Lead
0 ☐ Mercury

17-1 ☐ Nickel
2 ☐ Selenium
3 ☐ Silver
4 ☐ Thallium
5 ☐ Zinc

6 ☐ Acenaphthene
7 ☐ Acrolein
8 ☐ Acrylontrile
9 ☐ Aldrin/Dieldrin
0 ☐ Benzene

27-1 ☐ Benzidine
2 ☐ Carbon tetrachloride
3 ☐ Chlordane
4 ☐ Chlorinated benzenes
5 ☐ Chlorinated ethanes

6 ☐ Chloroalkyl ethers
7 ☐ Chlorinated naphthalene
8 ☐ Chlorinated phenols
9 ☐ Chloroform
0 ☐ 2-Chlorophenol

37-1 ☐ DDT and metabolites
2 ☐ Dichlorobenzenes
3 ☐ Dichlorobenzidine
4 ☐ Dichloroethylenes
5 ☐ 2,4-Dichlorophenol

42-6 ☐ Dichloropropane and dichloropropene
7 ☐ 2,4-Dimethylphenol
8 ☐ Dinitrotoluene
9 ☐ Diphenylhydrazine
0 ☐ Endosulfan and metabolites

47-1 ☐ Endrin and metabolites
2 ☐ Ethylbenzene
3 ☐ Fluoroanthene
4 ☐ Haloethers
5 ☐ Halomethanes

6 ☐ Heptachlor and metabolites
7 ☐ Hexachlorobutadiene
8 ☐ Hexachlorocyclohexane
9 ☐ Hexachlorocyclopentadiene
0 ☐ Isophorone

57-1 ☐ Naphthalene
2 ☐ Nitrobenzene
3 ☐ Nitrophenols
4 ☐ Nitrosamines
5 ☐ Pentachlorophenol

6 ☐ Phenol
7 ☐ Phthalate esters
8 ☐ Polychlorinated biphenyls (PCBs)
9 ☐ Polynuclear aromatic hydrocarbons
0 ☐ 2,3,7,8-Tetrachlorodibenzo-p-dioxin (TCDD)

67- ☐ Tetrachloroethylene
2 ☐ Toluene
3 ☐ Toxaphene
4 ☐ Trichloroethylene
5 ☐ Vinyl chloride

6 ☐ Oil and grease

9. Has your effluent ever been analyzed for any of the materials checked in question 8? Note — response to the second part of this question may aid IEPA in defining the need for adequate laboratory facilities as part of implementing pretreatment regulations.

[5] (6) YES ☐ (7-1) NO ☒ (7-2) N/A ☐ (7-3)

If YES, give:

Name of Lab _____ (8-37)

Address _____ (38-62)

City _____ (63-75)

State _____ (76-79)

10. **Treatment and/or pretreatment provided.** (Exclude Sanitary Waste and Stream Water.) Check appropriate box(es).

a) Treatment provided to any wastewater streams:

[6] (6)

(7) ☐ 1—pH adjustment
☐ 2—Skimming and/or settling
☐ 3—Coagulation and/or precipitation
☐ 4—Dissolved air flotation
(11) ☐ 5—Pits, ponds, or lagoons
(12) ☐ 6—Filtration
☐ 7—Activated sludge
☐ 8—Other
(15) ☒ 9—No treatment provided

b) Treatment provided to any sludges generated as part of any wastewater treatment. Check appropriate box(es).

(16) ☐ 1—Biological
☐ 2—Physical/Chemical
(18) ☒ 3—None

11. **Ultimate disposition of waste waters** — For all waste waters (excluding sanitary wastes and storm water) generated at your plant, please indicate their manner of ultimate disposition, and the volume involved. Indicate as many choices as is appropriate.

Discharge or final disposition of wastes (use Volume Code Key):

(19) 3 Streams, lakes, or other surface water
1 Sewers tributary to municipal treatment works
____ Storm sewers
____ Well injection
____ Underground percolation
____ Non-overflow lagoon
____ Land application
____ Recycled or reclaimed
(27) ____ N/A

Volume Code Key (gallon/day)	
1 — 0 to 1,500	5 — 50,000 to 100,000
2 — 1,500 to 10,000	6 — 100,000 to 500,000
3 — 10,000 to 25,000	7 — 500,000 to 1,000,000
4 — 25,000 to 50,000	8 — Greater than 1,000,000

12. For waste waters discharged to municipal treatment works, please indicate the number of discharge points (exclude santiary and storm discharges): 0 (28)

WASTE NEEDS ASSESSMENT

This section of the survey pertains to the classification, storage, and disposition of wastes generated by an industrial process or of sludges generated by the treatment or pretreatment of any effluent. It is not concerned with those wastes which are discharged to any surface water (e.g. stream, river, lake) or to any sewer or storm water system. It is only concerned with those wastes including pretreatment sludges which are ultimately disposed on- or off-site in landfills, surface impoundments, incinerators, deep wells, barrels, or land farms and with wastes which are sent to reclamation/recycling centers or waste exchanges.

Waste Types

The industrial wastes charts on the next two pages list the general waste types of interest in this survey. They are organized by physical state: liquids, sludges, and solids, and divided within each category into organic and inorganic wastes. Please note that specific waste names are not requested. Rather, you are asked to report your wastes under general waste categories. If your waste does not fall into one of the listed categories, please put it in "other" and indicate what the waste is in the comments column on the right-hand side of the chart. The "comments" column may be used to specify waste types, when requested. Radioactive wastes have been excluded from this survey.

pH

For water-based liquids and sludges, please indicate whether they are (1) acidic (pH<5), (2) alkaline (pH>9) or (3) neutral (pH 5-9) by filling in the appropriate code number.

Percent Solids

For sludges resulting from wastewater treatment or pretreatment, indicate the percent solids (by weight), if known.

Storage Method

Check the appropriate box. (✓)

Storage Time

Indicate the approximate storage time, in months. If storage is less than one month, fill in a "0".

Waste Quantities

In the space provided, report the waste quantity and unit code (gallon/year = 1, cubic yards per year = 2, and tons per year = 3). If the waste quantities are not readily known, please try to estimate the amounts. For example, if a waste disposal firm picks up five 55-gallon drums of oil per month, then the annual amount is 12x5 = 60 drums per year = 60x55 gallons = 3300 gallons per year.

Waste Disposal Method

Please check (✓) the appropriate waste disposal method used for each waste generated at your plant. If you check "other", please specify the method in the "comments" column to the right. Only check one disposal method per line (see important note below).

Disposal Location

Check (✓) the appropriate box.

Important Note

If more than one disposal method is used for a particular waste category, it is important to divide that waste by disposal method, putting one disposal method opposite the preprinted waste category and relisting that category name at the bottom of the chart and reporting the other disposal method(s). For example, if your facility generates 1000 gallons per year of waste oil and half is burned at the plant and half is picked up for reclamation, then 500 gallons would be reported, with "incineration as fuel" and "on-site" entered opposite "oil." At the bottom of the chart, you would write in "oil" and fill in 500 gallons per year and check "recycle/reclaim" and "off-site - Illinois." Additional space is provided on the back of the questionnaire for any additional waste types or disposal methods.

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	WASTE TYPE	WASTE CHARACTERISTICS		STORAGE METHOD				STORAGE TIME	WASTE QUANTITY, ANNUAL		DISPOSAL METHOD, Check Only One												DISPOSAL LOCATION			
		1=acidic, 2=alkaline, 3=neutral	Percent solids	Pits, ponds, lagoons	Barrels and drums	Tank	Other	Storage time, months	Quantity	Units *	Landfill	Incineration	Incineration as fuel	Deep well injection	Percolation/ Evaporation Lagoon	Land farming	Recycle/reclaim	Waste exchange	Chemical waste co.; method unknown	Long-term storage	Dust control/road oiling	Other (specify)	On-site	Off-site-Illinois	Off-site-out-of-state	COMMENTS
	LIQUIDS:																									
	Organic:																									
01	Oil					X		1	4,000	3											X		X			
02	Solvents: low flash point (< 140°F)					X		1	8,000	3											X		X			
03	Solvents: chlorinated				X			2	220	3						X							X			
04	Solvents: nonchlorinated																									
05	Aqueous organics (Specify in comments)																									
	Inorganic:																									
06	Metal-containing	2			X			2	1,100	3								X					X			
07	Cyanide and metal																									
08	Other inorganic																									
	SLUDGES:																									
	Organic:																									
09	Oily sludge		90			X		0	1	1													X			
10	Contaminated clay filters, mud, sand																									
11	Dye and paint sludges and residues																									
12	Fats and waxes																									
13	Resin, latex, monomer, plasticizer, adhesives																									
14	Chlorinated organic sludges																									
15	Nonchlorinated organic sludges																									

* Units Key: (1) tons/year (2) cubic yards/year (3) gallons/year (4) pounds/year

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	WASTE TYPE	WASTE CHARACTERISTICS 1=acidic, 2=alkaline, 3=neutral	Percent solids	STORAGE METHOD: Pits, ponds, lagoons	Barrels and drums	Tank	Other	STORAGE TIME: Storage time, months	WASTE QUANTITY, ANNUAL: Quantity	Units *	DISPOSAL METHOD, Check Only One: Landfill	Incineration	Incineration at fuel	Deep well injection	Percolation/ Evaporation Lagoon	Land farming	Recycle/reclaim	Waste exchange	Chemical waste co. method unknown	Long-term storage	Dust control/road oiling	Other (specify)	DISPOSAL LOCATION: On-site	Off-site-Illinois	Off-site-out-of-state	COMMENTS
	SLUDGES (Cont'd):																									
	Inorganic:																									
16	Metal containing	3	90			x		0		2	1	x												x		
17	Metal and cyanide																									
18	Other inorganic																									
	SOLIDS																									
19	Metallic dusts				x			2		6	1	x												x		
20	Non metallic inorganic dusts																									
21	Chlorinated organic solids																									
22	Nonchlorinated organic solids																									
	OTHER																									
23	Pesticides, herbicides																									
24	PCB's																									
25	Pathogenic																									
26	Explosive																									
27	Asbestos																									
	Other (Specify)																									
		1	7	1	4						01	02	03	04	05	06	07	08	09	10	11	12	1	2	3	

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	WASTE TYPE	WASTE CHARACTERISTICS		STORAGE METHOD				STORAGE TIME	WASTE QUANTITY, ANNUAL		DISPOSAL METHOD, Check Only One												DISPOSAL LOCATION			
7 8		9	10 11	12				13-14 RJ	15-20 RJ	21	22-23												24			25
		1=acidic, 2=alkaline, 3=neutral	Percent solids	Pits, ponds, lagoons 1	Barrels and drums 2	Tank 3	Other 4	Storage time, months	Quantity	Units *	Landfill 01	Incineration 02	Incineration as fuel 03	Deep well injection 04	Percolation/ Evaporation Lagoon 05	Land farming 06	Recycle/reclaim 07	Waste exchange 08	Chemical waste co., method unknown 09	Long-term storage 10	Dust control/road oiling 11	Other (specify) 12	On-site 1	Off-site-Illinois 2	Off-site-out-of-state 3	COMMENTS
				1	2	3	4				01	02	03	04	05	06	07	08	09	10	11	12	1	2	3	